1: Biull Eksp Biol Med 1993 Sep;116(9):311-3 Related Articles, Links

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[The mite allergen and allergoid stimulation of histamine secretion by mast cells]

[Article in Russian]

Khlgatian SV, Perova NA, Berzhets VM.

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Rat peritoneal mast cells were incubated with serum from highly mite-sensitive patients. It was demonstrated that exposure of passive sensitized mast cells to allergen from mites Dermatophagoides farinae induced the release of histamine. Exposure of mast cells to 10 micrograms/ml and 50 micrograms/ml mite allergen resulted in an increase of histamine secretion to 48% of the basal level. The allergoid (formaldehyde-modified mite allergen) had poor histamine-releasing activity compared to allergen. The allergoid (50 micrograms/ml) induced a 2.5-fold decrease in histamine release. The allergen at the same concentrations and the same release as allergen in dose 0.1 microgram/ml.

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PMID: 7509651 [PubMed - indexed for MEDLINE]

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[Hyposensitization in pollinosis. Results of a 3-year controlled study with 2 depot-allergoid grass pollen extracts: aluminum hydroxide-adsorbed allergoid and tyrosine-adsorbed allergoid]

[Article in German]

Muhlethaler K, Wuthrich B, Peeters AG, Terki N, Girard JP, Frank E.

Dermatologische Klinik, Universitat Zurich.

For controlled hyposensitization treatment over a period of three years 36 patients with confirmed grass pollen sensitization had been selected in 1986 and randomly distributed to receive preseasonal injection therapy: 23 patients were treated with an average of seven AGD (aluminium-adsorbed allergoid) injections, and 13 patients had received six TA (tyrosine-adsorbed allergoid) injections. Evaluation of the trial data collected during three years of preseasonal treatment showed the following results of tolerance and efficacy: Systemic side-reactions registered during therapy were only mild and transient and occurred in the average after 3% of the AGD injections and after 10% of the TA injections. Local reactions over 5 cm diameter were registered after 7% in the AGD group and after 9% in the TA group. Before therapy there was no significant difference (p greater than 0.05) between the groups; after three years of therapy the AGD injections had resulted in a mean net rise of specific IgG of 220% (significant, p = 0.001); during the same time, TA injections had resulted in a final net increase of 10% (not significant, p greater than 0.05). Both treatment forms did not lead to any statistically relevant changes of specific IgE values. After three years of hyposensitization treatment, patients of both groups had improved; but an advantage was documented for patients treated with AGD on the basis of scores for objective assessment as well as for registered symptom and medication scores.

Publication Types:
- Clinical Trial
- Randomized Controlled Trial

PMID: 2188335 [PubMed - indexed for MEDLINE]